Fill in this informati	on to identify your case:	
Debtor 1	Scot Allen Forrider	
Debtor 2 (Spouse, if filing)	Michelle Lee Forrider	
United States Bank	cruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
_	2:16-bk-50366	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official For	<u>m 106l</u>	MM / DD/ YYYY

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	□ Not employed	□ Not employed
employers.	Occupation	Driver	Instructor
Include part-time, seasonal, or self-employed work.	Employer's name	Coleman World-Wide Moving,	Union County YMCA
Occupation may include student or homemaker, if it applies.	Employer's address	1 Covan Drive Midland City, AL 36350	P.C. Williams Center 1150 Charles Lane Marysville, OH 43040
	How long employed tl	nere? 1.5yrs/Weekly	3 yrs/Semi-Monthly

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or List monthly gross wages, salary, and commissions (before all payroll

- deductions). If not paid monthly, calculate what the monthly wage would be.
- Estimate and list monthly overtime pay. 3.
- Calculate gross Income. Add line 2 + line 3.

			non-	ming spouse
2.	\$	6,375.56	\$	1,180.09
3.	+\$	0.00	+\$	0.00
4.	\$	6,375.56	\$	1,180.09

Official Form 106I Schedule I: Your Income page 1

	otor 1 otor 2	Scot Allen Forrider Michelle Lee Forrider	-		Cas	e number (if kn	own)	2:16	6-bk-503	366	
					Fo	or Debtor 1		noi	r Debtor n-filing s		
	Cop	y line 4 here	4.		\$_	6,375	.56	_ \$_	1,	,180.09	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	940	94	\$		173.34	
	5b.	Mandatory contributions for retirement plans	5k		\$		.00			0.00	
	5c.	Voluntary contributions for retirement plans	50		\$	125		- ' —		0.00	
	5d.	Required repayments of retirement fund loans	50	d.	\$		.00			0.00	
	5e.	Insurance	56	э.	\$	1,411	.80	\$		0.00	
	5f.	Domestic support obligations	5f	i.	\$		.00			0.00	
	5g.	Union dues	50	g.	\$	0	.00	\$		0.00	
	5h.	Other deductions. Specify: Un-Reimbursed Work Expenses	_ 5ł	1.+	\$	63	.33	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	2,541	.07	\$_		173.34	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,834	.49	\$_	1,	,006.75	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$	0	.00	\$		0.00	
	8b.	Interest and dividends	8k		\$		.00			0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		.00			0.00	
	8d.	Unemployment compensation	80	d.	\$		.00			0.00	
	8e.	Social Security	86	э.	\$		.00			0.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	8f 8g		\$_ \$_		.00			0.00	
	8h.	Other monthly income. Specify:		1.+	\$		.00	- : -		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	_ 9.		\$		.00	1 -		0.00	
	٠.	A		_							
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <sub>-</sub>		3,834.49	+ \$		,006.75	= \$ _	4,841.24
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	dep			•					0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					,		e. 12.	\$	4,841.24
13.	Do	you expect an increase or decrease within the year after you file this form	?						ı	Combir	ed y income
		No.	-								
		Yes. Explain:									

Fill in	n this informa	ation to identify yo	our case:					
Debte		Scot Allen F				Che	eck if this is:	
							An amended filing	
Debte (Spor	or 2 use, if filing)	Michelle Lee	Forride	r			A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unite	ed States Bankı	ruptcy Court for the	: SOUTH	HERN DISTRICT OF OHIO			MM / DD / YYYY	
Case (If kn		:16-bk-50366						
Of	ficial Fo	orm 106J						
Sc	hedule	J: Your	Exper	ises				12/15
Be a infor	es complete rmation. If m ber (if know	and accurate as nore space is ne n). Answer ever	s possible eded, atta ry questio	. If two married people ar ich another sheet to this				
Part 1.	Is this a joir	ribe Your House nt case?	noia					
	□ No. Go to							
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Househ	nold of De	btor 2.	
2.	Do vou hav	e dependents?	□ No					
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Daughter		8 Yrs	■ Yes
					D		45 V	□ No
					Daughter		15 Yrs	■ Yes □ No
					Son(Full Time S	Student)	20 Yrs	■ Yes
								□ No
	_							☐ Yes
3.	expenses o	penses include of people other t d your depende	han $_{\square}$	No Yes				
Part		nate Your Ongoi						
expe		a date after the l		uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it cluded it on <i>Schedule I: Y</i>			Your exp	enses
4.	The rental of payments ar	or home owners nd any rent for th	hip expen e ground c	uses for your residence. In or lot.	nclude first mortgage	4.	\$	0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				upkeep expenses		4c.	·	0.00
	4d. Home	eowner's associat	ion or con-	aominium dues		4d.	<b>ቕ</b>	0.00

0.00

Additional mortgage payments for your residence, such as home equity loans

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, internet, satellite, and cable services 6c. \$ 350,00 6c. Other Specify: 6c. S 350,00 6d. Other Specify: 7. Food and housekeeping supplies 7. \$ 818.10 6d. Childcare and children's education costs 8. \$ 0,00 7. Food and housekeeping supplies 9. \$ 810,00 8. Childcare and children's education costs 8. \$ 0,00 9. Clothing, laundry, and dry cleaning 9. \$ 80,00 10. Personal care products and services 10. \$ 40,00 11. Medical and dental expenses 11. \$ 100,00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 280,00 13. \$ 20,00 14. Charitable contributions and religious donations 14. \$ 0,00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15b. Heath insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15b. Heath insurance 15b. Heath insurance 15b. Water insurance. Specify: 15c. S 100,00 15c. Valicie insurance. Specify			Scot Allen Forrider Michelle Lee Forrider	Case num	ber (if known)	2:16-bk-50366
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22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. \$  1,950.00  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.						
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22c. Add line 22a and 22b. The result is your monthly expenses.  \$\frac{2,891.24}{\text{23b.}}\$\$  23c. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22c above.  23b. Copy your monthly expenses from your monthly income. The result is your monthly net income.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$\frac{1,950.00}{\text{30b.}}\$\$  1,950.00  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  \$\frac{1}{\text{No.}}\$\$			· · · · · · · · · · · · · · · · · · ·			2,891.24
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